Case 18-03085 Doc 1 Filed 02/02/18 Entered 02/02/18 15:48:47 Desc Main Document Page 1 of 54

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's	Chanda First name	First name
	license or passport).	Middle name	Middle name
	Bring your picture identification to your meeting with the trustee.	Dies Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-0423	

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Case number (if known)

Debtor 1 Chanda Dies

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):				
4. Any business nar Employer Identific Numbers (EIN) you used in the last 8 Include trade name doing business as	cation bu have years I have not used any business name or EINs. Business name(s)	☐ I have not used any business name or EINs. Business name(s)				
dollig busiliess as	EINs	EINs				
5. Where you live	227 Silverstone Dr	If Debtor 2 lives at a different address:				
	Carpentersville, IL 60107 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code				
	Cook County If your mailing address is different from the one above, fill it in here. Note that the court will send an notices to you at this mailing address.	County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.				
	Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code				
6. Why you are choo this district to file bankruptcy		Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.				
	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)				

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Case number (if known) Debtor 1 Chanda Dies

Par	t 2: Tell the Court About	Your E	งankruptcy Ca	se			
7.	The chapter of the Bankruptcy Code you are	Chec (Forn			each, see Notice Required by age 1 and check the appropriate	11 U.S.C. § 342(b) for Individuals Filing for Bankrupt	'cy
	choosing to file under	■ C	Chapter 7				
		□с	Chapter 11				
			Chapter 12				
			Chapter 13				
3.	How you will pay the fee		about how yo	u may pay. Typic attorney is submi	ally, if you are paying the fee yo	with the clerk's office in your local court for more durself, you may pay with cash, cashier's check, or malf, your attorney may pay with a credit card or check	noney
					Iments. If you choose this option (Official Form 103A).	n, sign and attach the Application for Individuals to	Pay
			but is not requapplies to you	uired to, waive yo ur family size and	ur fee, and may do so only if you you are unable to pay the fee in	only if you are filing for Chapter 7. By law, a judge ur income is less than 150% of the official poverty lir installments). If you choose this option, you must filial Form 103B) and file it with your petition.	ne that
9.	Have you filed for bankruptcy within the	■ N					
	last 8 years?	□ Ye			Mhaa	Casa sumban	
			District District		When When	Case number Case number	
			District		When	Case number Case number	
			Diotriot				
10.	Are any bankruptcy	■ N	0				
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Ye	es.				
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your	■ N	o. Go to li	ine 12.			
	residence?	□ Ye	_{es.} Has yo	ur landlord obtain	ed an eviction judgment agains	you?	
				No. Go to line 12	2.		
				Yes. Fill out <i>Initia</i> this bankruptcy p		ludgment Against You (Form 101A) and file it as par	t of

Document Page 4 of 54 Case number (if known) Debtor 1 Chanda Dies Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention? For example, do you own perishable goods, or

Number, Street, City, State & Zip Code

Where is the property?

livestock that must be fed, or a building that needs urgent repairs?

Debtor 1 Chanda Dies Document Page 5 of 54 Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case number (if known) Debtor 1 Chanda Dies Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ■ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 50-99 owe? **1**0,001-25,000 ☐ More than 100,000 □ 100-199 **200-999** How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100.001 - \$500.000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you ■ \$0 - \$50.000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Chanda Dies Signature of Debtor 2 Chanda Dies Signature of Debtor 1 Executed on Executed on February 2, 2018 MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Chanda Dies Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ John P.	Carlin	Date	February 2, 2018
Signature of	Attorney for Debtor		MM / DD / YYYY
laha D. Ca			
	arlin 6277222		
Printed name			
Suburban I	Legal Group		
Firm name			
1305 Remi	ngton Road		
Suite C			
Schaumbu	rg, IL 60173		
Number, Street,	City, State & ZIP Code		
Contact phone	847-843-8600	Email address	jcarlin@suburbanlegalgroup.com
6277222 IL	-		
Bar number & St	tate		

	DUCUITIC	TIL FAUC O UI J4	
mation to identify your	case:		
Chanda Dies			
First Name	Middle Name	Last Name	
First Name	Middle Name	Last Name	
inkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
	Chanda Dies First Name	Chanda Dies First Name Middle Name First Name Middle Name	Chanda Dies First Name Middle Name Last Name First Name Middle Name Last Name

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	t1: Summarize Your Assets		
			ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	111,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	6,865.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	117,865.0
⊃ar	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	121,334.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	261.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	38,334.48
	Your total liabilities	\$	159,929.48
⊃ar	t 3: Summarize Your Income and Expenses		
1.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,701.8
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,084.0
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sc	hedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a	ı personal	, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

page 1 of 2

the court with your other schedules.

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Case number (if known) Document

Debtor 1 Chanda Dies

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	\$ 5,179.84

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	im
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	261.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	261.00

	Case	18-0308	5 Doc 1		02/02/18 ument	Entered 02/02/1 Page 10 of 54	.8 15:48	:47 Des	sc Main
Fill	in this informatio	n to identify	your case and th	is filing	:				
Deb	otor 1 C	handa Dies	,						
		rst Name	Middle	Name		Last Name			
	otor 2 use, if filing) Fi	rst Name	Middle	Name		Last Name			
Unit	ed States Bankrup	otcy Court for	the: NORTHER	N DISTF	RICT OF ILLIN	OIS			
Cas	e number								☐ Check if this is an amended filing
Off	ficial Form	106A/E	3						
Sc	hedule A	∜ B: Pı	roperty						12/15
hink nfori	it fits best. Be as omation. If more spanerer every question.	complete and ce is needed,	accurate as possibl attach a separate sl	e. If two i neet to th	married people is form. On the	n asset fits in more than one are filing together, both are top of any additional pages	equally resp	onsible for su	pplying correct
_	No. Go to Part 2.	property?							
1.1				What	is the property	? Check all that apply			
	227 Silverstone Street address, if avail		scription		Single-family ho Duplex or multi Condominium	-unit building	the amount	t of any secured	aims or exemptions. Put d claims on <i>Schedule D:</i> ns <i>Secured by Property</i> .
	Carpentersville	: IL	60107-0000		Manufactured of Land	or mobile home	Current va		Current value of the portion you own?
	City	State	ZIP Code		Investment pro	perty	\$1 <i>′</i>	11,000.00	\$111,000.00
					Timeshare Other				our ownership interest ancy by the entireties, or
				Who h		in the property? Check one	a life estat	e), if known.	-
	Caali				Debtor 1 only				
	Cook				Debtor 2 only				
	County				Debtor 1 and D At least one of	bebtor 2 only the debtors and another		k if this is com structions)	munity property

property identification number:

pages you have attached for Part 1. Write that number here.......

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for

\$111,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Other information you wish to add about this item, such as local

Official Form 106A/B Schedule A/B: Property page 1

Debt	or 1 C	handa Dies		Document Pa	.ge 11 of 54 Case nui	mber (if known)	
3. C a	ırs, vans	trucks, tracto	rs, sport utility ve	hicles, motorcycles		_	
	No						
	Yes						
3.1	Make:	Honda		Who has an interest in the prop			red claims or exemptions. Put ecured claims on <i>Schedule D:</i>
	Model:	Civic		Debtor 1 only			e Claims Secured by Property.
	Year:	2012	98000	Debtor 2 only		current value of th	
		nate mileage: _ formation:	98000	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and		ntire property?	portion you own?
				At least one of the debtors and	u anomei		
				Check if this is community processes (see instructions)	property	\$4,000.0	90 \$4,000.00
Exa				d other recreational vehicles, tercraft, fishing vessels, snowmo			
				n for all of your entries from P that number here			\$4,000.00
Part 3	3: Descri	be Your Persona	al and Household Ite	ems			
6. H c	ousehold	goods and fur	nishings	terest in any of the following it	tems?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	Yes. De	scribe					
		_					
			accessories, as v	s, electronic equiptment, bedi well as dining room and chair lical fungible items in house		om	\$1,600.00
	ectronics						
_	No	including cell p		eo, stereo, and digital equipment nedia players, games	t, computers, printers, sca	inners, music coi	nections, electronic devices
Ш	res. De	scribe					
-			gurines; paintings, s, memorabilia, co	prints, or other artwork; books, p llectibles	oictures, or other art objec	ts; stamp, coin, c	or baseball card collections;
	No Yes. De	scribe					
E.	xamples:	for sports and Sports, photogr musical instrum	aphic, exercise, an	d other hobby equipment; bicycl	les, pool tables, golf clubs	s, skis; canoes ar	nd kayaks; carpentry tools;
_	No Yes. De	scribe					
	•	: Pistols, rifles,	shotguns, ammunit	tion, and related equipment			
	No Yes. De	scribe					

Dε	ebtor 1	Chanda Dies	Docu	ment	Page 12 of 54	number (if known)	
	Clothes					()	
			rs, leather coats, designer v	wear, shoes	, accessories		
	_	Describe					
						1	#
		clothir	ng supplies				\$200.00
2.	Jewelry Examp		stume jewelry, engagemen	t rings, wed	ding rings, heirloom jewelry	, watches, gems, g	old, silver
	■ No		, , ,				
	☐ Yes.	Describe					
3.		rm animals bles: Dogs, cats, birds, ho	rses				
	■ No	,					
	☐ Yes.	Describe					
14.	Any otl	her personal and house	hold items you did not all	ready list, i	ncluding any health aids y	you did not list	
	■ No	·	·				
	☐ Yes.	Give specific information					
15			your entries from Part 3, i here			have attached	\$1,800.00
Pa	rt 4: De	scribe Your Financial Asse	ts				
			equitable interest in any o	f the follow	ring?		Current value of the
							portion you own? Do not deduct secured claims or exemptions.
16	Cash						
		oles: Money you have in y	our wallet, in your home, in	a safe dep	osit box, and on hand when	you file your petition	on
	■ No						
	⊔ Yes						
17.		ts of money	or other financial accounts;	cortificatos (of donosit: shares in credit i	unione brokorago k	nouses, and other similar
	Схапір		ive multiple accounts with the			dilloris, brokerage i	louses, and other similar
	□ No			Institution r	name.		
	■ Yes						
		17.1	Checking	JP Morga checking			\$1,000.00
		17.1.	Offecking	oncoking	docodin		Ψ1,000.00
ı A	Ronds	, mutual funds, or public	cly traded stocks				
	Examp		ent accounts with brokerag	e firms, mor	ney market accounts		
	□ No		Institution or issuer name:				
	■ Yes		motitution of loader name.				
			401K				Unknown
			Starbux				
			SBUX 9 shares				
			\$65 value				\$65.00
19.			interests in incorporated	and uninc	orporated businesses, inc	cluding an interes	t in an LLC, partnership, and
	joint v	enture					

Official Form 106A/B Schedule A/B: Property page 3

		Case 18-03085	Doc 1			Desc Main
Del	otor 1	Chanda Dies		Document	Page 13 of 54 Case number (if known)	
[□ Yes.	Give specific information a	about them ne of entity:		% of ownership:	
	Negot Non-n		ersonal check	s, cashiers' checks, proi	egotiable instruments missory notes, and money orders. by signing or delivering them.	
_	■ No □ Yes.	Give specific information a	about them per name:			
I	Exam _l ■ No	·	SA, Keogh, 401	(k), 403(b), thrift saving	s accounts, or other pension or profit-sharing p	olans
l	→ Yes.	List each account separate Type of	ely. of account:	Institution r	name:	
	Your s		s you have ma		tinue service or use from a company ctric, gas, water), telecommunications compan	ies, or others
				Institution r	name or individual:	
_	Annuit ■ No	ies (A contract for a period	lic payment of	money to you, either for	r life or for a number of years)	
_		lssuer name	e and descripti	on.		
-	26 U.S.	ts in an education IRA, in C. §§ 530(b)(1), 529A(b), a		n a qualified ABLE pro	ogram, or under a qualified state tuition pro	gram.
_	■ No □ Yes	Institution n	ame and desc	ription. Separately file th	ne records of any interests.11 U.S.C. § 521(c):	
ı	No	, equitable or future inter		rty (other than anythin	g listed in line 1), and rights or powers exe	rcisable for your benefit
26.	Patent Examp	s, copyrights, trademarks	s, trade secre			
	■ No □ Yes.	Give specific information a	about them			
_	Exam	es, franchises, and other oles: Building permits, excl			n holdings, liquor licenses, professional license	es
	■ No □ Yes.	Give specific information a	about them			
Мо	ney or	property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
_	_	funds owed to you				
_	■ No □ Yes.	Give specific information a	about them, inc	cluding whether you alre	ady filed the returns and the tax years	
I	Exam _l ■ No	support bles: Past due or lump sum Give specific information		usal support, child suppo	ort, maintenance, divorce settlement, property	settlement
30.		amounts someone owes oles: Unpaid wages, disabi benefits; unpaid loans	lity insurance p	payments, disability ben someone else	efits, sick pay, vacation pay, workers' comper	sation, Social Security

■ No

Debtor 1	Case 18-03085 Chanda Dies	DOC 1 F	Document	Page 14 of 54 Case number (if known)	Desc Main
_					
31. Interes	. Give specific information sts in insurance policies pples: Health, disability, or life	e insurance; heal	th savings account	(HSA); credit, homeowner's, or renter's insurar	nce
☐ No					
■ Yes.	. Name the insurance compa Com	iny of each policy pany name:	y and list its value.	Beneficiary:	Surrender or refund value:
	<u>Life</u>	insurance thro	ugh work		\$0.00
If you some	nterest in property that is d are the beneficiary of a living one has died.			ed nsurance policy, or are currently entitled to rece	eive property because
■ No □ Yes.	. Give specific information				
33. Claim : Exam ■ No	·			iit or made a demand for payment s to sue	
■ No	contingent and unliquidate Describe each claim	ed claims of eve	ery nature, includir	ng counterclaims of the debtor and rights to	set off claims
35. Any fi	inancial assets you did not	already list			
■ No	. Give specific information	·			
36. Add	the dollar value of all of yo			nny entries for pages you have attached	\$1,065.00
Part 5: De	escribe Any Business-Related	Property You Ow	n or Have an Interest	In. List any real estate in Part 1.	
_ `	own or have any legal or equi	table interest in a	ny business-related p	property?	
_	Go to Part 6. Go to line 38.				
— 103.	GO TO TIME GO.				
	escribe Any Farm- and Comme you own or have an interest in fa			n or Have an Interest In.	
-	ou own or have any legal or o. Go to Part 7.	equitable inter	est in any farm- or	commercial fishing-related property?	
☐ Ye	es. Go to line 47.				
Part 7:	Describe All Property You	Own or Have an In	nterest in That You Di	d Not List Above	
Exam	ou have other property of an apples: Season tickets, country				
■ No □ Yes	. Give specific information				
54. Add	the dollar value of all of yo	ur entries from	Part 7. Write that r	number here	\$0.00

Official Form 106A/B Schedule A/B: Property page 5

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Debtor 1	Chanda Dies	Document	Page 15 01 54 Case number (if known)	
Part 8:	List the Totals of Each Part of this Form			
	: Total real estate, line 2			\$111,000.00

Part 2: Total vehicles, line 5 \$4,000.00 57. Part 3: Total personal and household items, line 15 \$1,800.00 58. Part 4: Total financial assets, line 36 \$1,065.00 Part 5: Total business-related property, line 45 59. \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 62. Total personal property. Add lines 56 through 61... \$6,865.00 Copy personal property total \$6,865.00

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$117,865.00

Official Form 106A/B Schedule A/B: Property page 6

		Doddillo	IIL I GGC IO OI OF		
Fill in this infor	mation to identify your	case:			
Debtor 1	Chanda Dies	Middle Name	Last Name		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)				☐ Check if this is a amended filing	an

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Specific laws that allow exemption Check only one box for each exemption.
227 Silverstone Dr Carpentersville, IL 60107 Cook County Line from <i>Schedule A/B</i> : 1.1	\$111,000.00	\$15,000.00 735 ILCS 5/12-901 100% of fair market value, up to any applicable statutory limit
2012 Honda Civic 98000 miles Line from <i>Schedule A/B</i> : 3.1	\$4,000.00	\$2,400.00 735 ILCS 5/12-1001(c) 100% of fair market value, up to any applicable statutory limit
household goods, electronic equiptment, bedroom and television room accessories, as well as dining room and chairs miscellanous typlical fungible items in house Line from <i>Schedule A/B</i> : 6.1	\$1,600.00	\$1,600.00 735 ILCS 5/12-1001(b) 100% of fair market value, up to any applicable statutory limit
clothing supplies Line from <i>Schedule A/B</i> : 11.1	\$200.00	\$200.00 735 ILCS 5/12-1001(a) 100% of fair market value, up to any applicable statutory limit

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Case number (if known)

Onanda Bioo				
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	The second secon		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Checking: JP Morgan Chase checking account	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
401K Line from Schedule A/B: 18.1	Unknown		100%	735 ILCS 5/12-1006
Line IIoiii Schedule A/B. 16.1			100% of fair market value, up to any applicable statutory limit	
Starbux SBUX	\$65.00		\$65.00	735 ILCS 5/12-1001(b)
9 shares \$65 value Line from <i>Schedule A/B</i> : 18.2			100% of fair market value, up to any applicable statutory limit	
Life insurance through work Line from Schedule A/B: 31.1	\$0.00		100%	215 ILCS 5/238
Line from Scriedule A/B. S1.1			100% of fair market value, up to any applicable statutory limit	
Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every No □ Yes. Did you acquire the property cove	3 years after that for ca	ases fi		
□ No				
☐ Yes				

		Document	Page 18	of 54		
Fill in this informat	ion to identify you	ur case:				
Debtor 1	Chanda Dies					
_	First Name	Middle Name	Last Name			
Debtor 2						
	First Name	Middle Name	Last Name		•	
United States Banks	untay Court for the	: NORTHERN DISTRICT OF ILLIN	NOIS			
United States Bankr	upicy Court for the	NORTHERN DISTRICT OF ILLII	<u> </u>			
Case number						
(if known)					☐ Check	if this is an
					ameno	led filing
Official Form [*]	<u>106D</u>					
Schedule D	: Creditors	s Who Have Claims S	ecured	by Propert	V	12/15
				<i>2</i>	,	
		If two married people are filing together out, number the entries, and attach it to				
1. Do any creditors ha	ve claims secured h	ov vour property?				
			ahadulaa Va	u hava nathina alaa t	a ranget on this form	
		this form to the court with your other s	criedules. You	u nave notning eise t	o report on this form.	
Yes. Fill in all	of the information	below.				
Part 1: List All S	ecured Claims					
2. List all secured cla	ims. If a creditor has	more than one secured claim, list the credi	tor separately	Column A	Column B	Column C
for each claim. If more	than one creditor ha	s a particular claim, list the other creditors i	n Part 2. As	Amount of claim	Value of collateral	Unsecured
much as possible, list the	he claims in alphabet	ical order according to the creditor's name.		Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 Fifth Third Ba	ank	Describe the property that secures the	e claim:	\$4,727.00	\$4,000.00	\$727.00
Creditor's Name		2012 Honda Civic 98000 miles				
Attn: Bankrup	otcy					
Department	•	As of the data varifile the eleim in O				
1830 E Paris		As of the date you file, the claim is: Chapply.	neck all that			
Grand Rapid	s, MI 49546	☐ Contingent				
Number, Street, City	y, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the debt?	? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as mo	ortgage or secu	ıred		
Debtor 2 only		car loan)				
☐ Debtor 1 and Debto	or 2 only	☐ Statutory lien (such as tax lien, mech	anic's lien)			
☐ At least one of the o	debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim	relates to a	Other (including a right to offset)				
community debt						
	Opened					
	09/13 Last					
	Active					
Date debt was incurre	ed 11/13/17	Last 4 digits of account numbe	er 0161			
2.2 First Bank Ri	chmond	Describe the property that secures the	e claim:	\$12,858.00	\$111,000.00	\$5,607.00
Creditor's Name		227 Silverstone Dr Carpentersv	ille, IL			
		60107 Cook County				
		As of the date you file, the claim is: Ch	nock all that			
20 N 9th St		apply.	icck all triat			
Richmond, IN	N 4/3/4	☐ Contingent				
Number, Street, City	y, State & Zip Code	Unliquidated				
		Disputed				
Who owes the debt?	? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as mo	ortgage or secu	ıred		
Debtor 2 only		car loan)				
Debtor 1 and Debto	or 2 only	☐ Statutory lien (such as tax lien, mech	anic's lien)			

☐ Judgment lien from a lawsuit

lacksquare At least one of the debtors and another

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Debtor 1 Chanda [С	case number (if know)		
First Name	Middle N	Name Last Name				
☐ Check if this claim community debt	relates to a	☐ Other (including a right to offset)				
Date debt was incurred	Opened 06/07 Last Active 9/20/17	Last 4 digits of account number	0001			
2.3 Nationstar Mo	ortgage LLC	Describe the property that secures the cl	laim:	\$103,749.00	\$111,000.00	\$0.00
Creditor's Name		227 Silverstone Dr Carpentersville 60107 Cook County	e, IL	<u> </u>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Attn: Bankrup 8950 Cypress Coppell, TX 7	Waters Blvd	As of the date you file, the claim is: Check apply. ☐ Contingent	call that			
Number, Street, City	, State & Zip Code	☐ Unliquidated				
		□ Disputed				
Who owes the debt?	Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only ■ Debtor 2 only		An agreement you made (such as mortg car loan)	gage or secu	ired		
Debtor 1 and Debtor	2 only	☐ Statutory lien (such as tax lien, mechanic	c's lien)			
☐ At least one of the d	ebtors and another	☐ Judgment lien from a lawsuit	,			
☐ Check if this claim community debt	relates to a	Other (including a right to offset)				
	Opened 08/13 Last Active		1515			
Date debt was incurred	d <u>9/16/17</u>	Last 4 digits of account number	1515			
Add the dellar value	of your optrios in C	Column A on this page. Write that number h	oro:	\$121,334.	00	
	-	the dollar value totals from all pages.	icie.			
Write that number he				\$121,334.	.00	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

			Document	Page	20 of 9	54					
Fill in this infor	mation to identify your o	case:									
Debtor 1	Chanda Dies										
	First Name	Middle	Name	Last Nam	Э		_				
Debtor 2	E. A.V.		N				_				
(Spouse if, filing)	First Name	Middle	Name	Last Nam	Э						
United States Ba	ankruptcy Court for the:	NORTHE	RN DISTRICT OF ILLI	INOIS			_				
Case number											
(if known)									Check i	f this is ar	า
								_	amende	ed filing	
Official Forr				_							
Schedule E	F: Creditors W	ho Hav	e Unsecured (Claim	<u> </u>					12/1	5
	d accurate as possible. Us tracts or unexpired leases										
Schedule G: Execu	utory Contracts and Unexpi	ired Leases ((Official Form 106G). Do	not inclu	ide any cre	ditors with par	tially se	ecured clain	ns that a	re listed in	
	tors Who Have Claims Secu ntinuation Page to this pag										
name and case nu		,,			,			p 0. u, u		Jugoo, IIII	,
Part 1: List A	II of Your PRIORITY Un	secured Cl	aims								
1. Do any credite	ors have priority unsecured	d claims aga	inst you?								
☐ No. Go to F	Part 2.										
Yes.											
	r priority unsecured claims										
	pe of claim it is. If a claim ha ne claims in alphabetical orde										
	than one creditor holds a pa					o priority arross	u. o u o.u			aano ag	0 0.
(For an explan	ation of each type of claim, s	see the instruc	ctions for this form in the i	instruction	booklet.)	Tatal alaim		Dalasita		Name at a st	4
						Total claim		Priority amount		Nonpriori amount	ty
2.1 Illinois [Department of Revenue	е	Last 4 digits of accoun	t number	5544	(00.00		\$0.00		\$0.00
•	reditor's Name										<u> </u>
	ox 64338		When was the debt inc	urred?	2017						
	o, IL 60664 Street City State Zlp Code		As of the date you file,	the claim	is: Check a	all that apply					
Who incurre	ed the debt? Check one.		☐ Contingent								
Debtor 1	only		☐ Unliquidated								
Debtor 2	only		☐ Disputed								
_	and Debtor 2 only		Type of PRIORITY unse	ecured cla	im:						
_	•		☐ Domestic support obl								
_	ne of the debtors and anothe		_								
	this claim is for a commun	-	■ Taxes and certain oth□ Claims for death or p	-		-					
Is the claim	subject to offset?		•	ersonai in	ury wniie yo	ou were intoxica	tea				
■ No □ Yes			Other. Specify	ice only							
			1100	ice offig							
2.2 Internal	Revenue Service		Last 4 digits of accoun	t number	5544	\$26	31.00	\$2	261.00		\$0.00
Priority Cr	reditor's Name		J								70.00
P.O. Bo			When was the debt inc	urred?	2014-20	016					
	Iphia, PA 19101-7346 Street City State Zlp Code		As of the date you file,	the claim	is: Check a	all that apply					
	ed the debt? Check one.		☐ Contingent	tilo olalili	io. Onook c	an triat appry					
■ Debtor 1	only		☐ Unliquidated								
Debtor 2	-		_								
_	•		Disputed								
_	and Debtor 2 only		Type of PRIORITY unse		uill.						
	ne of the debtors and anothe		☐ Domestic support obl	•							
	this claim is for a commun	· =	Taxes and certain oth	-		-					
_	subject to offset?		Claims for death or p	ersonal in	ury while yo	ou were intoxica	ted				
■ No			Other. Specify								

☐ Yes

tax debt

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Case number (if know) Document Debtor 1 Chanda Dies

Part	2: List All of Your NONPRIORITY Unsecu	red Claims						
3. C	o any creditors have nonpriority unsecured claim	s against you?						
	No. You have nothing to report in this part. Submit t	this form to the court with your other sche	edules.					
	Yes.							
u th	ist all of your nonpriority unsecured claims in the nsecured claim, list the creditor separately for each clain one creditor holds a particular claim, list the other art 2.	aim. For each claim listed, identify what t	ype of claim it is. Do not list claims already inc	luded in Part 1.	If more			
				Total claim				
4.1	Advocate	Last 4 digits of account number	4599		\$28.39			
	Nonpriority Creditor's Name 35134 Eagle Way	When was the debt incurred?	2017	-				
	Chicago, IL 60678 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply					
	Who incurred the debt? Check one.	, o auto you, o	er chook all and apply					
	■ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	□ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts					
	Yes	Other. Specify medical		-				
4.2	ASI	Last 4 digits of account number	6728		\$74.23			
	Nonpriority Creditor's Name		0047					
	Po box 33018 Saint Petersburg, FL 33733	When was the debt incurred?	2017	_				
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply					
	Who incurred the debt? Check one.							
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt		ration agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims						
	■ No	☐ Debts to pension or profit-sharin	g pians, and other similar debts					
	☐ Yes	Other. Specify debt						

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Denio	Chanda Dies		Case Humber (II know)	
4.3	Barclays Bank Delaware	Last 4 digits of account number	2869	\$6,092.00
	Nonpriority Creditor's Name 100 S West St Wilmington, DE 19801	When was the debt incurred?	Opened 06/08 Last Active 11/14/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card		
4.4	Certified Services, Inc Nonpriority Creditor's Name	Last 4 digits of account number	5214	\$60.00
	PO BOX 177 Waukegan, IL 60079-0177	When was the debt incurred?	2018	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify medical		
4.5	Chase Card Nonpriority Creditor's Name	Last 4 digits of account number	3789	\$5,051.00
	Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 11/06 Last Active 11/26/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit Card		

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Debtor	1 Chanda Dies		Case number (if know)					
4.6	Citicards Cbna Nonpriority Creditor's Name	Last 4 digits of account number	1105	\$6,024.00				
	Citicorp Credit Svc/Centralized Bankrupt Po Box 790040 Saint Louis, MO 63179	When was the debt incurred?	Opened 05/07 Last Active 10/31/17					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply					
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not					
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Credit Card	g plans, and other similar debts					
4.7	Comenity Bank Nonpriority Creditor's Name	Last 4 digits of account number	1972	\$3,601.00				
	Attn: Bankruptcy Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 11/12 Last Active 11/11/17					
	Number Street City State Zlp Code Who incurred the debt? Check one.							
	Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharin						
	No	·						
	☐ Yes	Other. Specify Charge Acc	ount					
4.8	Credit One Bank Na Nonpriority Creditor's Name	Last 4 digits of account number	5605	\$434.00				
	Po Box 98873 Las Vegas, NV 89193	When was the debt incurred?	Opened 10/17 Last Active 11/24/17					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply					
	■ Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	Check if this claim is for a community							
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not					
	No	☐ Debts to pension or profit-sharin ☐ Other. Specify Credit Card	g plans, and other similar debts					
	Yes							

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Debt	or 1 Chanda Dies		Case number (if know)	
4.9	Elgin Family Physicians 901 Center	Last 4 digits of account number	4023	\$353.07
	Nonpriority Creditor's Name Suite 3000	When was the debt incurred?	2017	
	Elgin, IL 60120	_		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	_	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify medical		
4.1 0	IRS	Last 4 digits of account number	0423	\$260.00
0	Nonpriority Creditor's Name	_		<u>·</u>
	Internal Revenue Service Cincinnati, OH 45999	When was the debt incurred?	2015	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debts	
	□ Yes	Other. Specify debt	31	
4.1 1	Medco Financial Associates, Inc. Nonpriority Creditor's Name	Last 4 digits of account number	9499	\$256.00
	PO Box 525	When was the debt incurred?	2017	
	Gurnee, IL 60031		in Charle all that apply	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	ів: Спеск ан тат арріу	
	<u> </u>			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed	Labet o	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharir	ng plans, and other similar debts	
			יש אינהים, מוום סנויסי סוויוומי מפטנס	
	Yes	Other. Specify collections		

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Dept	or 1 Chanda Dies		Case number (if know)	
4.1 2	Oncoa	Last 4 digits of account number	7259	\$756.00
	Nonpriority Creditor's Name PO Box 1280	When was the debt incurred?	2018	
	Oaks, PA 19456 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify debt		
4.1 3	Ophthalmology Assoc	Last 4 digits of account number	9499	\$255.79
	Nonpriority Creditor's Name 1670 Capital St Suite 100	When was the debt incurred?	2016	
	Elgin. IL 60124			
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify medical		
4.1 4	Syncb/athleta Dc	Last 4 digits of account number	8294	\$3,526.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060	When was the debt incurred?	Opened 04/16 Last Active 11/26/17	
	Orlando, FL 32896			
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	a plane, and other circles delete	
	■ No	Debts to pension or profit-sharin		
	☐ Yes	Other. Specify Credit Card		

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Denioi	Chanda Dies		Case Humber (II know)	
4.1	Syncb/ccdstr	Last 4 digits of account number	9589	\$252.00
	Nonpriority Creditor's Name Po Box 96060 Orlando, FL 32896	When was the debt incurred?	Opened 11/15 Last Active 11/24/17	-
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	\square Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Charge Acc	ount	-
4.1	Synchrony Bank/ Old Navy Nonpriority Creditor's Name	Last 4 digits of account number	2247	\$3,535.00
	Attn: Bankruptcy Po Box 965060	When was the debt incurred?	Opened 10/12 Last Active 11/29/17	-
	Orlando, FL 32896 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	•		
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	on plans, and other similar debts	
	☐ Yes	■ Other. Specify Charge Acc		
				-
4.1	Synchrony Bank/Amazon Nonpriority Creditor's Name	Last 4 digits of account number	2877	\$4,459.00
	Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 11/12 Last Active 10/17/17	-
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Charge Acc	ount	_

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Debto	r 1 Chanda Dies		Case number (if know)	
4.1 8	Timothy Sheehan	Last 4 digits of account number	0423	\$171.00
	Nonpriority Creditor's Name 525 S Tyler Rd Suite K	When was the debt incurred?	2017	
	Saint Charles, IL 60174 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify _medical		
4.1 9	Visa Dept Store National Bank/Macy's Nonpriority Creditor's Name	Last 4 digits of account number	4986	\$2,778.00
	Attn: Bankruptcy Po Box 8053	When was the debt incurred?	Opened 10/15 Last Active 10/26/17	
	Mason, OH 45040 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Charge Acc	ount	
4.2	Yarkony Rehab Associates	Last 4 digits of account number	H000	\$368.00
0	Nonpriority Creditor's Name 1975 Lin Lor Ln Ste 195	When was the debt incurred?	2017	Ψ000.00
	Elgin, IL 60123			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	Пол		
		Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	At least one of the debtors and another	Student loans	a Claiii.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	■ Other. Specify medical	<u>. </u>	
	— 103	Otner. Specify The diddle		

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Chanda Dies

Case number (if know)

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Т	otal Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	261.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	261.00
				Т	otal Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	38,334.48
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	38,334.48

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Fill in this information to identify your case: Debtor 1 Chanda Dies Middle Name First Name Last Name Debtor 2 Middle Name Last Name (Spouse if, filing) First Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the r, Street, City, State and ZIP (contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			
	City		State	ZIP Code	_
		·		·	

		Docume	ent Page 30 o	of 54	
Fill in this	information to identify your	case:			
Debtor 1	Chanda Dies				
20210	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filin	ng) First Name	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Caaa aumh	hor				
Case numb (if known)	<u> </u>			☐ Check if this is an	
				amended filing	
Official	l Form 106H				
	lule H: Your Cod	ahtare		12/1	_
Scrieu	ule II. Toul Cou	enroi 2		12/1	ა
our name	and case number (if known) you have any codebtors? (If	. Answer every question		to this page. On the top of any Additional Pages, write as a codebtor.	
'		, , ,	·		
■ No					
☐ Yes	i				
	hin the last 8 years, have you a, California, Idaho, Louisiana			ry? (Community property states and territories include ington, and Wisconsin.)	
`	Go to line 3.	use or legal equivalent live	with you at the time?		
L res	s. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
in line Form out Co	2 again as a codebtor only 106D), Schedule E/F (Officia olumn 2.	f that person is a guaran	tor or cosigner. Make	r if your spouse is filing with you. List the person she sure you have listed the creditor on Schedule D (Off 06G). Use Schedule D, Schedule E/F, or Schedule G t	icial o fil
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The creditor to whom you owe the de Check all schedules that apply:	bt
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
_					
	Number Street City	Stata	ZIP Code		
	City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
_					
	Number Street City	State	ZIP Code		
,	Ony	Jaio	Zii Coue		

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Fill	in this information to identify your	case:							
Deb	otor 1 Chanda Die	es .			_				
	otor 2 uuse, if filing)				_				
Uni	ted States Bankruptcy Court for th	e: NORTHERN DISTRIC	T OF ILLINOIS		_				
	se number nown)								chapter
Of	fficial Form 106l							wing date.	
	chedule I: Your Inc	rome				MM / DD/ Y	YYY		12/15
sup _i spo atta	as complete and accurate as po plying correct information. If yo use. If you are separated and yo ch a separate sheet to this form t1:	u are married and not filir our spouse is not filing wi . On the top of any addition	ng jointly, and your th you, do not inclu	spouse is	s living wit nation abo	h you, inclu ut your spo	ude informa ouse. If more	tion about y space is n	your needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-filin	g spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status*	■ Employed			☐ Emplo	oyed		
		Employment status	□ Not employed	☐ Not employed			mployed		
	employers.	Occupation	HR Coordinator						
	Include part-time, seasonal, or self-employed work.	Employer's name	Acuana Clubs In	nternation	nal				
	Occupation may include student or homemaker, if it applies.	Employer's address	1E Bode Rd Streamwood, IL	60107					
		How long employed ti	here? 6 years	;					
			*See Att	tachment	for Addition	onal Emplo	yment Infor	mation	
Par	Give Details About Mo	onthly Income							
	mate monthly income as of the use unless you are separated.	date you file this form. If y	you have nothing to r	eport for a	any line, wri	ite \$0 in the	space. Inclu	de your non	-filing
,	u or your non-filing spouse have r e space, attach a separate sheet t		ombine the information	on for all e	mployers fo	or that perso	n on the line	s below. If y	ou need
					For D	ebtor 1	For Debto		
2.	List monthly gross wages, sai deductions). If not paid monthly			2.	\$	3,718.00	\$	N/A	
3.	Estimate and list monthly ove	rtime pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Add	line 2 + line 3.		4.	\$3,	718.00	\$	N/A	

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Deb	tor 1	Chanda Dies	_	Ca	se number (<i>if kr</i>	iown)				
				F	or Debtor 1		For	Debtor 2	or	
	C	u line 4 hare	4	•	0.740			-filing sp		
	Copy	y line 4 here	4.	\$	3,718	3.00	\$_		N/A	
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	832	2.00	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$		0.00	\$_		N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$	19	.50	\$		N/A	
	5d.	Required repayments of retirement fund loans	5d.			0.00	\$		N/A	
	5e.	Insurance	5e.	\$.67	\$_		N/A	
	5f.	Domestic support obligations	5f.	\$		0.00	\$_		N/A	
	5g. 5h.	Union dues Other deductions. Specify:	5g. 5h	\$ + \$		0.00	, <u>\$</u> _		N/A N/A	
•		· · · · · · · · · · · · · · · · · · ·	_	·						
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,016		\$_		N/A	
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,701	.83	\$_		N/A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
		monthly net income.	8a.	\$	C	00.0	\$		N/A	
	8b.	Interest and dividends	8b.	\$		0.00	\$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive								
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0	0.00	\$		N/A	
	8d.	Unemployment compensation	8d.	,		0.00	\$_		N/A	
	8e.	Social Security	8e.	\$		0.00	\$		N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.	\$	C	0.00	\$		N/A	
	8g.	Pension or retirement income	8g.	\$	C	0.00	\$		N/A	
	8h.	Other monthly income. Specify:	8h	+ \$	C	0.00	+ \$		N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	C	0.00	\$_		N/A	<u> </u>
10.		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	S	2,701.83	+ \$		N/A =	= \$	2,701.83
44			<u>,</u>							
11.	Inclu othe	e all other regular contributions to the expenses that you list in <i>Schedule</i> de contributions from an unmarried partner, members of your household, your r friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not cify:	deper				-	Schedule . 11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailes						12.	\$	2,701.83
									Combir	ned y income
13.	Do y ■ □	You expect an increase or decrease within the year after you file this form No. Yes. Explain:	?							, income

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Debtor 1	Chanda Dies	Case number (if known)	
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Official Form B 6I Attachment for Additional Employment Information

Debtor		
Occupation		
Name of Employer	Starbucks	
How long employed		1
Address of Employer	1532 Algonquin Road	

Official Form 106I Schedule I: Your Income page 3

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Fill	in this information to identify your case:				
Deb	otor 1 Chanda Dies		Chec	ck if this is:	
1	otor 2 ouse, if filing)			An amended filing A supplement show 13 expenses as of	ving postpetition chapter the following date:
Unit	ted States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS	;	-	MM / DD / YYYY	
	e number				
	nown)				
O	fficial Form 106J				
	chedule J: Your Expenses				12/15
info	as complete and accurate as possible. If two married people are file primation. If more space is needed, attach another sheet to this formation (if known). Answer every question.				
Par	t 1: Describe Your Household Is this a joint case?				
	■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate household?				
	☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses for</i>	· Separate Housel	nold of Deb	tor 2.	
2.	Do you have dependents? ■ No				
		Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the dependents names.				□ No □ Yes
	appring names.				□ No
	-				☐ Yes
					□ No □ Yes
	-				□ No
_					☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents? ■ No □ Yes				
Est	Estimate Your Ongoing Monthly Expenses imate your expenses as of your bankruptcy filing date unless you penses as of a date after the bankruptcy is filed. If this is a supplemblicable date.	are using this fo nental <i>Schedule</i>	rm as a su <i>J</i> , check th	pplement in a Cha e box at the top o	pter 13 case to report f the form and fill in the
the	lude expenses paid for with non-cash government assistance if yo value of such assistance and have included it on Schedule I: Your ficial Form 106I.)			Your expe	enses
4.	The rental or home ownership expenses for your residence. Inclupayments and any rent for the ground or lot.	ude first mortgage	4. \$		1,300.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		50.00
	4c. Home maintenance, repair, and upkeep expenses4d. Homeowner's association or condominium dues		4c. \$ 4d. \$		65.00
5.	Additional mortgage payments for your residence, such as home	equity loans	4a. \$ 5. \$		0.00

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Debtor 1	Chanda Dies	Case num	ber (if known)	
6. Utili	ties:			
6a.	Electricity, heat, natural gas	6a.	\$	185.00
6b.	Water, sewer, garbage collection	6b.	\$	150.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	·	0.00
6d.	Other. Specify:	6d.	·	0.00
	d and housekeeping supplies	7.	·	400.00
	d and nousekeeping supplies dcare and children's education costs	7. 8.	\$	
_		9.	\$	0.00
	hing, laundry, and dry cleaning		*	35.00
	sonal care products and services	10.	\$	55.00
	ical and dental expenses	11.	\$	65.00
	sportation. Include gas, maintenance, bus or train fare.	12.	\$	350.00
	ot include car payments. ertainment, clubs, recreation, newspapers, magazines, and books	13.	·	50.00
	ritable contributions and religious donations	14.	·	0.00
	•	14.	Ψ	0.00
5. Ins ı Dor	ot include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	0.00
	Health insurance	15b.	·	0.00
	Vehicle insurance	15c.	·	117.00
	Other insurance. Specify:	15d.	· ·	0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.		Ψ	0.00
	cify: IRS	16.	\$	35.00
	allment or lease payments:			33.00
	Car payments for Vehicle 1	17a.	\$	227.00
	Car payments for Vehicle 2	17b.	*	0.00
	Other. Specify:	17c.	·	0.00
	Other. Specify:	17d.	·	0.00
	r payments of alimony, maintenance, and support that you did not report as		Ψ	0.00
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
	er payments you make to support others who do not live with you.		\$	0.00
Spe		19.		
	er real property expenses not included in lines 4 or 5 of this form or on Sche		our Income.	
	Mortgages on other property	20a.		0.00
20b	Real estate taxes	20b.	\$	0.00
20c.	Property, homeowner's, or renter's insurance	20c.	· -	0.00
	Maintenance, repair, and upkeep expenses	20d.		0.00
	Homeowner's association or condominium dues	20e.	· -	0.00
	ar: Specify:	21.	·	0.00
. Jul	Specify.		- Ψ	0.00
2. Cal	culate your monthly expenses			
	Add lines 4 through 21.		\$	3,084.00
22b	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c.	Add line 22a and 22b. The result is your monthly expenses.		\$	3,084.00
			· —	2,30 1100
	sulate your monthly net income.		_	
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	·	2,701.83
23b	Copy your monthly expenses from line 22c above.	23b.	-\$	3,084.00
23c.	Subtract your monthly expenses from your monthly income.	220	\$	-382.17
	The result is your <i>monthly net income</i> .	23c.	Ψ	-302.17
4 Do	you expect an increase or decrease in your expenses within the year offer yo	ou file this	form?	
	rou expect an increase or decrease in your expenses within the year after yo xample, do you expect to finish paying for your car loan within the year or do you expect your			e or decrease because of a
	fication to the terms of your mortgage?			2. 200.0000 0000000 01
	lo.			

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Fill in th	is information to identify your	case:				
Debtor 1	Chanda Dies					
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if,		Middle Name	Last Name			
	3,					
United S	tates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS			
Case nui	mber					
(if known)				☐ Che	eck if this is an	
				ame	ended filing	
Officia	l Form 106Dec					
Decl	aration About a	an Individual	Debtor's Sch	nedules	12/15	
	Sign Below					
Did	you pay or agree to pay some	eone who is NOT an attorn	ey to help you fill out ba	nkruptcy forms?		
	No					
П	Yes. Name of person			Attach Bankruptcy Petition	Preparer's Notice	
Ц					Declaration, and Signature (Official Form 119)	
				-	,	
	er penalty of perjury, I declare they are true and correct.	that I have read the sumn	nary and schedules filed	with this declaration and		
	•					
_	/s/ Chanda Dies		X(D	Nahitan O.		
	Chanda Dies Signature of Debtor 1		Signature of D	PEDIOF 2		
	Signature of Debtor 1					
	Date February 2, 2018		Date			
						

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Fill	in this inforn	nation to identify you	r case:			
Deb	otor 1	Chanda Dies First Name	Middle Name	Last Name		
Deb	otor 2					
(Spo	use if, filing)	First Name	Middle Name	Last Name		
Unit	ted States Bai	nkruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS		
Cas (if kn	se number				_	theck if this is an mended filing
Sta Be a	s complete a	of Financial and accurate as possiore space is needed,	attach a separate sheet to	re filing together, both are	ankruptcy equally responsible for sup additional pages, write you	
		n). Answer every que Details About Your Ma	ธนอก. arital Status and Where You	Lived Before		
1.		r current marital statu				
	☐ Married■ Not mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now	٠.	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. state					ity property state or territory co, Texas, Washington and W	
	■ No □ Yes. Ma	ake sure you fill out <i>Scl</i>	hedule H: Your Codebtors (Ot	ificial Form 106H).		
Par	t 2 Explai	n the Sources of You	r Income			
4.	Fill in the total	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
	□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$15,840.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

Yes. List all payments to an insider.

Insider's Name and Address

Dates of payment

Total amount paid

Amount you still owe

page 2

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Case number (if known) Debtor 1 Chanda Dies

	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
	Mary Weis		\$600.00	\$0.00		
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos No Yes. List all payments to an insider		yments or transfer a	any property on a	account of a de	ebt that benefited an
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name
Par	t 4: Identify Legal Actions, Repossessio	ns, and Foreclosures	,			
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	e case
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address			oreclosed, garni	·	I, seized, or levied? Value of the property
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment bed No Yes. Fill in the details.		cluding a bank or fil	nancial institutio	n, set off any a	mounts from your
	Creditor Name and Address	Describe the action th	e creditor took	Date take	e action was n	Amount
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a No Yes		erty in the possess	ion of an assign	ee for the bene	fit of creditors, a
Par	t 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift.	otcy, did you give any gif	ts with a total value	of more than \$6	00 per person?	,
	Gifts with a total value of more than \$600 per person	Describe the gifts	5	Date the	es you gave gifts	Value
	Person to Whom You Gave the Gift and Address:					

Page 40 of 54 Document Debtor 1 Chanda Dies Case number (if known) 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? \square No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) \$1,000.00 Goodwill goods Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. **Person Who Was Paid** Date payment Description and value of any property Amount of Address transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You Suburban Legal Group PC \$1000 for Attorney Fees 2018 \$1,000.00 1305 Remington Rd Suite C Schaumburg, IL 60173 Credit Info Net \$65 for three credit reports, and payment 2018 \$65.00 for credit counseling and debtor education Dayton, OH 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. Description and value of any property Person Who Was Paid Date payment Amount of Address transferred or transfer was payment made

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Debtor 1 Chanda Dies

8.	Within 2 years before you filed for bankrupte transferred in the ordinary course of your be include both outright transfers and transfers mainclude gifts and transfers that you have alread No	usiness or financial aff ade as security (such as	airs? the granting of a s			-	
	Yes. Fill in the details.						
	Person Who Received Transfer Address	Description and property transfer		paymo	ibe any property or ents received or debts n exchange	Date tra made	nsfer was
	Person's relationship to you						
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro		ny property to a s	self-settle	d trust or similar device	of which y	ou are a
	■ No □ Yes. Fill in the details.						
	Name of trust Description and value of the property transferred Date Transfer was made						
Dor	t 8: List of Certain Financial Accounts, Ins	strumanta Safa Danasi	t Bayos and Sta	rogo Unit			
Par	List of Certain Financial Accounts, ins	struments, Sare Deposi	t boxes, and Sto	rage Unit	S		
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, o	•					
	houses, pension funds, cooperatives, associ				-,,		or once ago
	☐ Yes. Fill in the details.						
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accouinstrument	nt or	Date account was closed, sold, moved, or transferred		st balance closing or transfer
21.	Do you now have, or did you have within 1 y cash, or other valuables?	ear before you filed fo	r bankruptcy, an	y safe de _l	oosit box or other depo	sitory for s	ecurities,
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do yo	ou still it?
Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?							
	■ No □ Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe	the contents	Do yo have	ou still it?
Par	t 9: Identify Property You Hold or Control	for Someone Else					
23.	Do you hold or control any property that so for someone.	meone else owns? Incl	ude any property	y you bori	rowed from, are storing	for, or hole	d in trust
	■ No						
	Yes. Fill in the details.	Where is the pro-	20rtu?	Docaribo	the property		Volue
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, S Code)		Pescine	the property		Value
Par	t 10: Give Details About Environmental Info	ormation					
or	the purpose of Part 10, the following definition	ons apply:					

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 5 Case 18-03085 Doc 1 Filed 02/02/18 Entered 02/02/18 15:48:47 Desc Main Document Page 42 of 54

Case number (if known)

Debtor 1 Chanda Dies

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste hazardous substance toxic substance

	hazardous material, pollutant, contaminant, or similar term.						
Rep	ort a	II notices, releases, and proceedings that	at you know about, regardless of wher	the	ey occurred.		
24.	Has	any governmental unit notified you that	you may be liable or potentially liable	unc	der or in violation of an environme	ental law?	
		No Yes. Fill in the details.					
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice	
25.	Hav	re you notified any governmental unit of	any release of hazardous material?				
	■ No □ Yes. Fill in the details.						
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice	
26.	6. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.					nd orders.	
		No Yes. Fill in the details.					
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case	
Par	t 11:	Give Details About Your Business or	Connections to Any Business				
27.	Wit	hin 4 years before you filed for bankrupt	cy, did you own a business or have an	ıy of	the following connections to any	business?	
		☐ A sole proprietor or self-employed in	n a trade, profession, or other activity,	eith	ner full-time or part-time		
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)						
		☐ A partner in a partnership					
		☐ An officer, director, or managing exc	ecutive of a corporation				
		☐ An owner of at least 5% of the voting	g or equity securities of a corporation				
		■ No. None of the above applies. Go to Part 12.					
		Yes. Check all that apply above and fill	in the details below for each business	S.			
	Address		Describe the nature of the business Name of accountant or bookkeeper		Employer Identification number Do not include Social Security number or ITIN.		
	Ì	, , ,	ramo or accountant or accouncespor		Dates business existed		
28.		hin 2 years before you filed for bankrupt itutions, creditors, or other parties.	cy, did you give a financial statement t	to aı	nyone about your business? Inclu	de all financial	
		No Yes. Fill in the details below.					
	Ad	me dress mber, Street, City, State and ZIP Code)	Date Issued				
Dor	140	Simp Balavi					

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy page 6 Case 18-03085 Doc 1 Filed 02/02/18 Entered 02/02/18 15:48:47 Desc Main Document Page 43 of 54

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.

18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Chanda Dies
Chanda Dies
Chanda Dies
Signature of Debtor 2

Signature of Debtor 1

Date February 2, 2018

Date
Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

No
Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this inforn	nation to identify your	case:			
Debtor 1	Chanda Dies				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	NORTHERN DIST	RICT OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an amended filing
Official Fo		n for Indiv	iduals Filing Unde	er Chapter 7	12/15
_	vidual filing under cha	-	out this form if:		
you have lease You must file this	ed personal property a s form with the court w ver is earlier, unless th	nd the lease has no ithin 30 days after	ot expired. you file your bankruptcy petition e time for cause. You must also s		
	ople are filing together d date the form.	in a joint case, bo	th are equally responsible for sup	oplying correct inform	ation. Both debtors must
	and accurate as possib our name and case num		needed, attach a separate sheet	to this form. On the to	op of any additional pages,
Part 1: List Yo	our Creditors Who Have	e Secured Claims			
			Craditara Wha Haya Claima Saa	ured by Branarty (Offi	inial Form 106D) fill in the
information be	low.		Creditors Who Have Claims Sec	ured by Property (On	iciai Form 106D), fill in the
Identify the cre	editor and the property the	hat is collateral	What do you intend to do with a secures a debt?	the property that	Did you claim the property as exempt on Schedule C?
Creditor's Fi	fth Third Bank		☐ Surrender the property.☐ Retain the property and redee	em it	□ No
	004011 1 0:: 0	0000 ''	Retain the property and enter		■ Yes
property	2012 Honda Civic 9	8000 miles	Reaffirmation Agreement. Retain the property and [expla	nin1·	
securing debt:			The tail the property and lexpla		
Part 2: List Yo	our Unexpired Persona	l Property I eases			
For any unexpire in the information	d personal property le n below. Do not list rea	ase that you listed Il estate leases. Un	in Schedule G: Executory Contrace expired leases are leases that are he trustee does not assume it. 11	still in effect; the leas	
Describe your u	nexpired personal prop	perty leases		Will	the lease be assumed?
Lessor's name:	<u></u>				Ma
Description of lea	sed				NU
Property:					Yes
Lessor's name:					No
Description of lea Property:	sed				Yes
Lessor's name:					No

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

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Debtor 1	Chanda Dies	Case number (if known	n)
Description Property:	of leased		☐ Yes
Lessor's nar Description Property:			□ No □ Yes
Lessor's nar Description Property:			□ No □ Yes
Lessor's nar Description Property:			□ No □ Yes
Lessor's nar Description Property:	of leased		□ No □ Yes
Under pena	ign Below Ity of perjury, I declare that I have indicated my at is subject to an unexpired lease.	intention about any property of my estate that s	ecures a debt and any personal
Chand	anda Dies da Dies ure of Debtor 1	X Signature of Debtor 2	
Date	February 2, 2018	Date	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-03085 Doc 1 Filed 02/02/18 Entered 02/02/18 15:48:47 Desc Main Document Page 50 of 54

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In re	Chanda Dies		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPE	NSATION OF ATTOR	NEY FOR DE	EBTOR(S)
co	ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filing e rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy, o	r agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	1,000.00
	Prior to the filing of this statement I have received		. \$	1,000.00
	Balance Due		\$	0.00
2. \$	335.00 of the filing fee has been paid.			
3. T	he source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4. T	he source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5. I	I have not agreed to share the above-disclosed comp	ensation with any other person u	nless they are mem	bers and associates of my law firm.
	I have agreed to share the above-disclosed compensations copy of the agreement, together with a list of the nar			
6. I1	n return for the above-disclosed fee, I have agreed to re	nder legal service for all aspects	of the bankruptcy c	ease, including:
b. c.	Analysis of the debtor's financial situation, and rende Preparation and filing of any petition, schedules, state Representation of the debtor at the meeting of credite [Other provisions as needed] Negotiations with secured creditors to redu agreements and applications as needed; proof liens on household goods.	ement of affairs and plan which nors and confirmation hearing, and ce to market value; exemption	nay be required; any adjourned hea planning; prepar	rings thereof; ation and filing of reaffirmation
7. B	y agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any discha adversary proceeding.			of from stay actions or any other
	3	CERTIFICATION		
	certify that the foregoing is a complete statement of any nkruptcy proceeding.	y agreement or arrangement for p	ayment to me for re	epresentation of the debtor(s) in
Fe	bruary 2, 2018	/s/ John P. Carlin		
Da		John P. Carlin 6277	222	
		Signature of Attorney Suburban Legal Gro	oup	
		1305 Remington Ro		
		Suite C Schaumburg, IL 601	73	
		847-843-8600 Fax:	847-843-8605	
		jcarlin@suburbanleg		
		Name of law firm		

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United States Bankruptcy Court Northern District of Illinois

In re	Chanda Dies		Case No.	
		Debtor(s)	Chapter 7	
	VE	CRIFICATION OF CREDITOR M	MATRIX	
		Number of	f Creditors:	25
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credi	itors is true and correct to	o the best of my
	February 2, 2018	/s/ Chanda Dies		

Advocate 35134 Eagle Way Chicago, IL 60678

ASI Po box 33018 Saint Petersburg, FL 33733

Barclays Bank Delaware 100 S West St Wilmington, DE 19801

Certified Services, Inc PO BOX 177 Waukegan, IL 60079-0177

Chase Card Po Box 15298 Wilmington, DE 19850

Citicards Cbna Citicorp Credit Svc/Centralized Bankrupt Po Box 790040 Saint Louis, MO 63179

Comenity Bank Attn: Bankruptcy Po Box 182125 Columbus, OH 43218

Credit One Bank Na Po Box 98873 Las Vegas, NV 89193

Elgin Family Physicians 901 Center Suite 3000 Elgin, IL 60120

Fifth Third Bank Attn: Bankruptcy Department 1830 E Paris Ave Se Grand Rapids, MI 49546 First Bank Richmond 20 N 9th St Richmond, IN 47374

Illinois Department of Revenue P.O. Box 64338 Chicago, IL 60664

Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101-7346

IRS
Internal Revenue Service
Cincinnati, OH 45999

Medco Financial Associates, Inc. PO Box 525 Gurnee, IL 60031

Nationstar Mortgage LLC Attn: Bankruptcy 8950 Cypress Waters Blvd Coppell, TX 75019

Oncoa PO Box 1280 Oaks, PA 19456

Ophthalmology Assoc 1670 Capital St Suite 100 Elgin, IL 60124

Syncb/athleta Dc Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Syncb/ccdstr Po Box 96060 Orlando, FL 32896 Synchrony Bank/ Old Navy Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/Amazon Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Timothy Sheehan 525 S Tyler Rd Suite K Saint Charles, IL 60174

Visa Dept Store National Bank/Macy's Attn: Bankruptcy Po Box 8053 Mason, OH 45040

Yarkony Rehab Associates 1975 Lin Lor Ln Ste 195 Elgin, IL 60123